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Commissioner
Susan Belinda Christian, J.D.
Commissioner
Cecilia Chung
Commissioner
Suzanne Giraud ED.D
Commissioner
Tessie M. Guillermo
Commissioner

**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

**London N. Breed Mayor
Department of Public Health**



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MINUTES
HEALTH COMMISSION MEETING
Tuesday February 21, 2023 4:00 p.m.
101 Grove Street, Room 300
San Francisco, CA 94102 & via Webex

1) CALL TO ORDER

Present: Commissioner Laurie Green, MD, Vice President
Commissioner Edward A. Chow M.D.
Commissioner Cecilia Chung
Commissioner Tessie Guillermo

Excused: Commissioner Dan Bernal President
Commissioner Susan Belinda Christian, J.D.
Commissioner Suzanne Giraud, Ph.D

The meeting was called to order at 4:04pm.

2) GENERAL PUBLIC COMMENT

Patrick Monette-Shaw submitted the following written public comment:

Is the second RCA following LHH's 90-Day Monitoring Survey still a draft, pending CMS approval?
In reviewing CDPH Form 2567 Survey inspections reports — LHH's 7/12/2019 sex abuse scandal, a 11/19/2019 Survey, a 4/19/21 Survey, RCA1, and RCA2 — LHH received 118 patient care scope and severity citations ranging from "D" to "L," including nine "Immediate Jeopardy" citations across three years. Another 20 facility violations brings the total to 138 actual citations. Add in another 96 deficiencies identified in Phase 1 and Phase 2 of the "First Mock Survey" ranging from "A" to "L" scope and severity findings, including 13 additional "Immediate Jeopardy" findings. Add another 27 violations on LHH's acute units, for a total of 261 citations and findings. This illustrates gross mismanagement of LHH. Expedite hiring a Nursing Home Administrator well versed in preventing patient care F-Tag violations. Fire SFHN and SFGH managers transplanted to LHH ignorant about SNF regulations!

3) **JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE**

Commissioner Tessie Guillermo, LHH JCC Chair, presented the February 14, 2023 LHH JCC meeting update.

Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Is the second RCA following LHH's 90-Day Monitoring Survey still a draft, pending CMS approval? In reviewing CDPH Form 2567 Survey inspections reports — LHH's 7/12/2019 sex abuse scandal, a 11/19/2019 Survey, a 4/19/21 Survey, RCA1, and RCA2 — LHH received 118 patient care scope and severity citations ranging from "D" to "L," including nine "*Immediate Jeopardy*" citations across three years. Another 20 facility violations brings the total to 138 actual citations. Add in another 96 deficiencies identified in Phase 1 and Phase 2 of the "First Mock Survey" ranging from "A" to "L" scope and severity findings, including 13 additional "*Immediate Jeopardy*" findings. Add another 27 violations on LHH's acute units, for a total of 261 citations and findings. This illustrates gross mismanagement of LHH. Expedite hiring a Nursing Home Administrator well versed in preventing patient care F-Tag violations. Fire SFHN and SFGH managers transplanted to LHH ignorant about SNF regulations!

Dr. Teresa Palmer, asked about the statement made by Roland Pickens at the January 31st Board of Supervisors' hearing regarding a code or law that would enable LHH to grandfather in the 120 beds which are currently not in use. She noted that the public has not received any relevant information although public information requests have been submitted.

Commissioner Comments:

Commissioner Guillermo thanked Zoe Harris for filling in for Mr. Morewitz at the February 14, 2023 LHH JCC meeting.

4) **LAGUNA HONDA HOSPITAL AND REHABILITATION CENTER (LHH) CLOSURE PLAN AND CMS RECERTIFICATION UPDATE**

Roland Pickens, MHA, FACHE, Acting LHH CEO, presented the item.

Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Page 6 of Pickens' presentation continued minimizing LHH's problems, saying, "The Action Plan includes hundreds of improvements – all of which we must implement by 4/13/23." That's untrue. My secondary analysis of data in the 49-page draft "Action Plan" released to LHH staff and the public on 2/8/2023 listed 454 "milestones" — corrective actions — not the 300 milestones Pickens had been misrepresenting to the Health Commission for months, but finally just admitted. How many of the 454 milestones were submitted to CMS in February? On page 9, Pickens asserted LHH submitted a "Revised Closure Plan" to CMS in December. He failed mentioning CMS notified him on 2/1/2023 CMS, CDPH, and CDHCS provided feedback on the "Revised Closure Plan" on 1/13/23 and 1/18/23, but CMS hadn't received a revised version in response to their suggestions. Pickens just admitted LHH submitted the suggested revisions on 2/2/2023. Has the "Revised Closure Plan" been approved yet?

Commissioner Comments:

Commissioner Chow thanked Mr. Pickens for the update. He asked for clarification regarding how the approximate 400 milestones relate to the regulatory tags associated with surveys and/or investigations. He noted that although all have to be addressed, some will be prioritized. Mr. Pickens noted that there are 460 milestones; 330 were assigned as part of the initial root cause analysis. During the first monitoring survey, 130 milestones were added. It is anticipated that the second 90-day monitoring survey may add additional milestones. LHH is on track to meet 130 milestones for the month of February. Regulatory tags range from "A" to "L," and were assigned by CMS. The root cause analysis summarized issues into themes instead of individual

CMS-prescribed tags. Therefore the 460 milestones are not associated with regulatory tags. There are 66 regulatory tags assigned during the first monitoring score which have a risk total of 796. Between now and May 13, the LHH goal is to document to the QIE and CMS that all of these 66 tags have been addressed so that the score will be zero.

Commissioner Green thanked the LHH team for their continued hard work and dedication in their efforts to address milestones and regulatory tags.

Director Colfax acknowledged Mr. Pickens leadership. He noted that it takes hundreds of daily observations in the hospital in order to conduct the necessary quality improvement work. He added that there is a huge amount of work associated with addressing each of the milestones and regulatory tags.

5) **CONSENT CALENDAR**

Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

Regarding today's Consent Calendar to consider approving LHH Policy and Procedure C-01-02, Autopsies, while this policy is obviously important for families of residents who died at LHH, what about LHH's still living patients facing functional declines? I've repeatedly begged this Commission to figure out whatever happened to LHH's policy "D-1.0, Restorative Care Nursing Policy," which you should have reviewed with 123 other LHH P&P's. Obtaining recertification may hinge on resurrecting LHH's discontinued Restorative Care program in both the Rehab Services Department under Dr. Pascual, and unit-based Restorative Nursing program. It's a key focus of LHH's "Action Plan" submitted to CMS following the two RCA's. It's "Root Cause #8: Lack of formalized restorative nursing program," within section 5, Resident Rights and Freedom from Harm. The Restorative Care program has been dead for over three years. This Commission must prioritize getting the Restorative program back up and running, or risk staying decertified!

Action Taken: The Health Commission unanimously approved the following:

- **LAGUNA HONDA HOSPITAL POLICY:**
 - C01-02 Autopsy Policy & Procedures

6) **APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF FEBRUARY 7, 2023.**

Public Comment:

Patrick Monette Shaw made verbal comments and submitted the following summary:

It's disturbing hearing today the person appointed to become LHH's Chief Medical Officer — who in a skilled nursing facility setting is typically called a "Medical Director," not a "CMO" like in acute-care hospital settings — is Dr. Neda Ratanawongsa. She may be an Internist, but her most recent job is SFDPH's "Chief Medical Informatics Officer." She is primarily a researcher and clinical professor. Her Linked-In biography reports she has no experience in skilled nursing facility settings. And once again, an SFGH employee is being foisted on LHH without skilled nursing patient experience. The Commission's February 7 meeting minutes are more disturbing, because they report SFDPH's troubled Electronic Health Record (EHR) database — EPIC — doesn't handle patient's care plans over long periods of time. HSAG's first *Root Cause Analysis* report also says LHH's EPIC system isn't fully configured for SNF settings — particularly infection control prevention documentation — and isn't enhanced for long-term care plans

Action Taken: The Health Commission unanimously approved the February 7, 2023 meeting minutes.

7) DIRECTOR'S REPORT

Grant Colfax MD, DPH, Director of Health, presented the item.

SAN FRANCISCO TO END COVID-19 PUBLIC HEALTH EMERGENCY DECLARATION AND HEALTH ORDERS

DPH announced that the City's COVID-19 public health emergency declaration and Health Officer Order No. C19-07y, "Safer Return Together", along with additional health orders, will end on February 28 in alignment with the end of California's COVID-19 State of Emergency. While the threat from COVID-19 is not over, as both the virus and the tools to respond to it have evolved over the past three years, San Francisco is now in a significantly better position today than at any prior time in the pandemic due to the City's high vaccination and booster rates and the availability of effective COVID-19 treatments.

While the San Francisco Health Officer will rescind the Safer Return Together order, the Health Officer intends to issue two orders that will affect hospitals, skilled nursing facilities, and other healthcare and jail settings. Under the first order, staff in these settings will still be required to wear a mask when interacting with patients, clients, or people who are incarcerated. Masking requirements for the general public in these settings will end. In addition, masking requirements in homeless shelters for both the general public and staff will also end. These changes will go into effect on March 1.

Although the Safer Return Together order's masking requirements will be removed for patients, clients, or people who are incarcerated, those who operate these facilities can decide to be more restrictive than local health guidelines and may still implement their own requirements. People can continue to choose to wear masks around others for added protection and people should respect other's choices around their health.

DPH will be monitoring the ongoing national discussions about COVID-19 vaccination schedules and will adjust the existing local vaccination requirements once federal and state recommendations are made.

San Francisco has led the nation in its response to COVID-19, which would not have been possible without the robust vaccination and testing infrastructure put in place by DPH, in partnership with community-based organizations and health systems partners throughout the City, as well as the participation and cooperation of San Francisco residents. Due to these efforts, San Francisco has one of the highest primary vaccination series completion rates in the nation, and with 38% of residents receiving the updated bivalent booster, the City continues to be well ahead of state and national rates.

It remains important for individuals to be diligent about their health and the health of others as the virus is still with us. Please stay home when sick, continue to wash hands and keep well-fitted masks such as a N95, KN95 or KF94 on hand.

The federal emergency is also ending on May 11, 2023. DPH encourages eligible residents to seek out COVID-19 resources such as at-home tests, treatments for those who test positive, and the updated bivalent booster, which are currently free. Information on all these resources can be found at sf.gov/covid.

Although the COVID-19 landscape continues to change, our commitment to communities most impacted by the virus stands firm. We will continue our vital partnerships with communities to ensure that lower barrier COVID-19 resources, such as testing and vaccinations, remain available to those most in need even as we shift from an emergency response to long-term recovery.

DPH has, and always will, provide care to those without access to insurance or who have other barriers through our strong community partnerships and robust San Francisco Health Network which includes neighborhood clinics, as well as Zuckerberg San Francisco General Hospital.

DPH ISSUES A HEALTH ALERT ON DANGERS OF XYLAZINE OR “TRANQ”

The San Francisco Office of the Chief Medical Examiner (OCME) has determined that four individuals who had died of drug overdoses had low levels of xylazine in their systems.

Testing overdose descendants who died between mid-December 2022 and mid-January 2023, the OCME found, so far, that four individuals who had died of drug overdoses had low levels of xylazine in their systems. OCME, using state grant funding, included xylazine as part of a 2022 re-testing effort and incorporated it into the existing surveillance program for 2023 and onward.

Xylazine, colloquially known as “Tranq,” is a non-opioid veterinary tranquilizer that is not FDA- approved for human use. It is commonly mixed with fentanyl, heroin, and other illicit drugs.

While xylazine has been circulating in the illicit drug supply on the East Coast of the United States for several years, DPH and OCME is seeing evidence of its presence in San Francisco for the first time. The OCME detected fentanyl in each of the four cases in which xylazine was present. Preliminary data from the OCME indicates that fentanyl, the primary driver of the overdose crisis in San Francisco, accounted for 72% of all overdose deaths last year.

Xylazine can cause excessive sleepiness and respiratory depression symptoms that appear similar to those associated with opioid use, making it difficult distinguish opioid overdoses from xylazine exposure.

Xylazine can be smoked, snorted, or injected. It causes severe skin ulcerations that spread and worsen quickly. Repeated xylazine injection has also been associated with severe, necrotic skin lesions often requiring advanced wound care. These wounds may occur in areas of the body away from the injection site.

Identifying xylazine in San Francisco is concerning. The OCME has not yet seen any xylazine-related wounds or evidence that people in San Francisco are injecting xylazine. To date, DPH has not received any reports of skin wounds associated with xylazine, nor xylazine intoxication or withdrawal.

These facts suggest that the drug may not yet be widespread, but DPH and its City and community partners are working to learn more, share information and prepare street response teams to recognize the impacts of xylazine and respond appropriately.

Coordination among City agencies is improving our surveillance of xylazine in the drug supply. These coordination efforts will enhance the ability to understand the extent of drug implications and respond quickly.

DPH is working with public health and healthcare colleagues in assessing the impact of xylazine and developing supportive care options, including treatment.

For Reference:

[FDA alerts health care professionals of risks to patients exposed to xylazine in illicit drugs](#)

ZUCKERBURG SAN FRANCISCO GENERAL HOSPITAL (ZSFG) CELEBRATES 150 YEARS

ZSFG Hospital celebrated its 150th Anniversary serving San Francisco at City Hall on February 9. The San Francisco General Hospital Foundation (SFGHF) hosted two sold-out events – the Hearts Gala and Hearts After Dark – a tribute to the strong support for all of us and our work. Mayor Breed welcomed hundreds of supporters and Speaker Emerita Nancy Pelosi received a Lifetime Achievement Award for her decades of support to ZSFG.

The event showcased to the region the significance of ZSFG and its place in San Francisco’s history as we reached this major milestone. It was a great evening celebrating with patients, staff and community. The Foundation recognized three ZSFG heroes: Anais Arriaga is a breast cancer survivor and advocate who is spreading awareness about the services and care available at ZSFG to help others. She is collaborating with ZSFG and other care providers like Pink Ribbon Girls, to inspire people going through similar journeys. In addition, two of ZSFG’s nurse leaders received awards: Joan Torres, Project Manager for the Behavioral Emergency Response Team (BERT) was honored for her ground-breaking work leading and implementing the BERT team that has provided thousands of consultations and interventions with patients to prevent and reduce violence and improve safety on campus. Additionally, Merjo Roca, Urgent Care Clinic Nurse Manager, was honored for her extraordinary work launching and managing the COVID-19 and MPX Vaccine Clinic at ZSFG. This clinic has helped provide more than 214,000 COVID and 21,000 MPX vaccinations to our patients and community.

Thank you to the SFGH Foundation for hosting the event and to Event Chair Elizabeth Minick, and Hearts in SF Co-Founders Pam Baer and Judy Guggenhime, for a wonderful evening and for their year-round support of our entire ZSFG community.

JOINT COMMISSION SURVEY AT ZUCKERBURG SAN FRANCISCO GENERAL HOSPITAL

The Joint Commission will recertify ZSFG’s Advanced Primary Stroke Program after conducting a two-day survey of the Regulatory Affairs and Neurosciences teams on February 14 and 15. During the visit, they toured and interviewed staff, reviewed policies and procedures, and completed medical record reviews in the Emergency Department, Interventional Radiology, and Critical Care. The Commission concluded their survey and relayed several positive observations about the program, including the intravenous tissue plasminogen activator (tPA) treatment rate, stroke simulations, the First 5 program, and outpatient rehabilitation integration. Three findings were included about documentation that provide opportunities for improvement at ZSFG. Congratulations to our Stroke Program staff for their exceptional teamwork and patient care!

2023 EMPLOYEE ENGAGEMENT SURVEY

The 2023 Employee Engagement Survey is being conducted across the 7500+ employee population of DPH. The survey, conducted by NRC Health, is brief, confidential, and web based.

The strategy for maximum participation in the survey includes:

- Easy access for employees via email, text messages and QR codes on marketing materials (posters and flyers)
- Available in English, Spanish, and traditional Chinese
- Talking points and email templates for Directors and Division outreach efforts
- Site visits/team huddles/staff meetings prior to and during survey launch
- Incentives for survey response including gift cards and branded water bottles

Employee feedback gathered from the survey responses will inform future workforce development strategy at the Department of Public Health.

MPX UPDATE

LOCATION	TOTAL CASES AS OF 2/16/23 (probable and confirmed)
San Francisco	845
California	5,729
U.S.	30,193
Worldwide	85,992

COVID-19 UPDATE

As of 2/8:

- San Francisco's 7-day rolling average of new COVID cases per day is 76 and 61 people are hospitalized, including 5 in the ICU.
- Eighty-six percent of all SF residents have been vaccinated and 65% have received booster dose(s).

[DPH in the News](#)

Commissioner Comments:

Commissioner Chow requested that Dr. Susan Philip, San Francisco Health Officer and Director of the DPH Population Health Division, give an update on changes to COVID-19 related Health Orders at the next Health Commission meeting. He noted that the changes at the state and local level are of interest to the Commission and the public.

Commissioner Guillermo noted that the DPH has such a wide range of types of administrative and clinical staff and asked when the last time the DPH Employee Survey was conducted. Mr. Morewitz stated that the last full survey was conducted in 2019. Director Colfax added that the intent of the survey is offer meaningful questions to gather input and feedback from staff in order to address issues to improve the department. He noted that follow-up surveys will hopefully indicate positive change will be made. Commissioner Guillermo stated that she looks forward to reviewing results and monitoring improvement work over time She is curious how different types of staff differ in their issues and feedback.

8) COMMUNITY AND PUBLIC HEALTH COMMITTEE UPDATE

Commissioner Chung, member, stated that the committee discussed two presentations: "Preliminary Findings of the National HIV Behavioral Health Surveillance Survey," and "Whole Person Integrated Care: Intersections with Behavioral Health." Regarding the survey presentation, she noted that there is an increase in women, heterosexuals, and Black/African American participants. She noted it is important to track these changes and ascertain if this is a result of the pandemic. Regarding the Whole Person Care update, she noted that it was good to hear that the Maria X Martinez Center is being well utilized.

Commissioner Chow also attended the committee and noted that the Whole Person Care presenters said that they should be able come back to report the programs' impact on high utilizers of multiple emergency services. He added that the Alcohol Housing Program offers ten detox beds with an intention of adding ten more beds.

9) OTHER BUSINESS:

This item was not discussed.

10) ADJOURNMENT

The meeting was adjourned at 5:19pm.